

Image# 29934253892

NOTIFICATION OF MULTICANDIDATE STATUS

(See reverse side for instructions)

This form should be filed after the Committee qualifies as a multicandidate committee.

1. (a) NAME OF COMMITTEE IN FULL Wyoming Values PAC		2. FEC IDENTIFICATION NUMBER C00442368
(b) Number and Street Address 901 N Washington St Suite 102		
(c) City, State and ZIP Code Alexandria VA 22314		3. TYPE OF COMMITTEE (check one) <input type="checkbox"/> STATE PARTY <input checked="" type="checkbox"/> OTHER

I certify that **one** of the following situations is correct (complete line 4 or 5):

- 4. STATUS BY AFFILIATION:** The committee submitted its Statement of Organization (FEC FORM 1) on _____ and simultaneously qualified as a multicandidate committee through its affiliation with:

Committee Name: _____

FEC Identification Number: _____

5. STATUS BY QUALIFICATION:

- (a) candidates:** The committee has made contributions to the five (5) federal candidates listed below (ONLY state party committees may leave this blank.):

	Name	Office Sought	State/District	Date
(i)	MICHAEL B ENZI	Senate	WY 00	09/30/2008
(ii)	CYNTHIA MARIE LUMMIS	House	WY 00	09/30/2008
(iii)	NORM COLEMAN	Senate	MN 00	09/30/2008
(iv)	SUSAN M COLLINS	Senate	ME 00	09/30/2008
(v)	MITCH MCCONNELL	Senate	KY 00	09/30/2008

- (b) Contributors:** The committee received a contribution from its 51st contributor on: 07/06/2009

- (c) Registration:** The committee has been registered for at least 6 months. FEC FORM 1 was submitted on: 12/18/2007

- (d) Qualification:** The committee met the above requirements on: 07/06/2009

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct, and complete.

TYPE OR PRINT NAME OF TREASURER Timothy A. Koch	SIGNATURE OF TREASURER Electronically Filed by Timothy A. Koch	DATE 07/14/2009
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Text

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

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For further information contact:
Federal Election Commission, Washington, DC 20463
Toll-free 800-424-9530
Local 202-694-1100

FEC FORM 1 M
Revised 1/2001